KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION

Form U3C
June 2015
Form must be Typed
Form must be completed on a per well basis

ANNUAL REPORT OF PRESSURE MONITORING, FLUID INJECTION AND ENHANCED RECOVERY

Complete all blanks - add pages if needed. Copy to be retained for five (5) years after filing date.

OPERATOR: License # 31980
Name: Lotus Operating Company, L.L.C.
Address 1: 100 S MAIN ST, STE 420
Address 2:
City: WICHITA State: KS Zip: 67202 + 3737
Contact Person: Tim Hellman
Phone: (316) 262-1077
Lease Name: KADAU SWD
Well Number: V1-13

API No.: 15-035-24493-00-01
Permit No: E32538.1
Reporting Year: 2020
(January 1 to December 31)

____ - ____ - ____ - SE Sec. 13 Twp. 33 S. R. 5 ☑ E ☐ W
(Q/Q/Q/Q)
495 feet from ☐ N / ☑ S Line of Section
1835 feet from ☑ E / ☐ W Line of Section
County: Cowley

I. Injection Fluid:

Type *(Pick one)*: ☐ Fresh Water ☑ Treated Brine ☐ Untreated Brine ☐ Water/Brine
Source: ☑ Produced Water ☐ Other *(Attach list)*
Quality: Total Dissolved Solids: ____ mg/l Specific Gravity: ____ Additives: ____
(Attach water analysis, if available)

II. Well Data:

Maximum Authorized Injection Pressure: 100 psi Injection Zone: MISSISSIPPIAN
Maximum Authorized Injection Rate: 3000 barrels per day
Total Number of Enhanced Recovery Injection Wells Covered by this Permit: ____ *(Include TA's)*

III.

Month:	Total Fluid Injected BBL	Maximum Fluid Pressure	Total Gas Injected MCF	Maximum Gas Pressure	# Days of Injection
January	93	0	0	0	31
February	87	0	0	0	29
March	93	0	0	0	31
April	90	0	0	0	30
May	93	0	0	0	31
June	90	0	0	0	30
July	93	0	0	0	31
August	93	0	0	0	31
September	90	0	0	0	30
October	93	0	0	0	31
November	90	0	0	0	30
December	93	0	0	0	31
TOTAL	1098		0		

Submitted Electronically